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FACSIMILE COVER SHEET

TO: Examiner Philip C. Lee
Group Art Unit 2154

FROM: Frank L. Cire

RE: U.S. Application No. 09/853,767
Atty. Docket No.: 02908.000005

FAX NO.: (571) 273-8300

DATE: August 4, 2005 **NO. OF PAGES:** 2123
(including cover page)

TIME: 7:50 PM 8:21 PM **SENT BY:** FC

MESSAGE

Attached is an Amendment After Final Rejection in response to the final Office Action dated May 4, 2005.

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on:

August 4, 2005
(Date of Deposit)

Frank L. Cire, Reg. No. 42,419
(Name of Attorney for Applicant)

Signature

August 4, 2005
Date of Signature

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Amendment Under 37 C.F.R. § 1.116
Group Art Unit 2154, Expedited Procedure

In re Application of:

Docket No. 02908.000005

SEBASTIEN JEAN, et al.

Application No.: 09/853,767

Examiner: Philip C. Lee

Filed: May 14, 2001

Group Art Unit: 2154

For: NETWORK DEVICE MIMIC SUPPORT

Date: August 4, 2005

THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 40	MINUS	** 40	=	x \$25 \$50	- 0 -
INDEP. CLAIMS	* 2	MINUS	*** 3	=	x \$100 \$200	- 0 -
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						- 0 -

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

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Frank L. Cline, Reg. No. 42,419
(Name of Attorney for Applicant)



Signature

August 4, 2005
Date of Signature

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicants
Frank L. Cire
Registration No.: 42,419

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
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Amendment Under 37 C.F.R. § 1.116
Group Art Unit 2154, Expedited Procedure

02908.000005

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: Philip C. Lee
SEBASTIEN JEAN, ET AL.)	
	:	Group Art Unit: 2154
Application No.: 09/853,767)	
	:	
Filed: May 14, 2001)	
	:	
For: NETWORK DEVICE MIMIC)	
SUPPORT	:	August 4, 2005
)	

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AFTER FINAL REJECTION

Sir:

In response to the Office Action dated May 4, 2005, please amend the
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